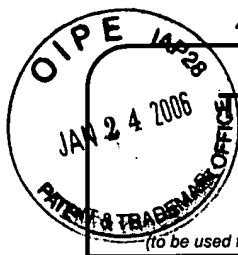


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PTO/SB/21 (09-04)



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/828,846
Filing Date	April 20, 2004
First Named Inventor	Binder, Steven R.
Art Unit	1645
Examiner Name	Pablo S. Whaley
Attorney Docket Number	02558B-063710US

Total Number of Pages in This Submission	
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ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard		
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature	<i>Gerald T. Gray</i>		
Printed name	Gerald T. Gray		
Date	January 20, 2006	Reg. No.	41,797

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	<i>Sylvia E. Arnold</i>		
Typed or printed name	Sylvia E. Arnold	Date	January 20, 2006

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Alexandria, VA 22313-1450

On January 20, 2006

TOWNSEND and TOWNSEND and CREW LLP

By: Sylvia E. Arnold
Sylvia E. Arnold

PATENT

Attorney Docket No.: 02558B-063710US

Client Reference No.: BRP00107



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Steven R. Binder

Application No.: 10/828,846

Filed: April 20, 2004

For: PATTERN RECOGNITION
METHOD FOR DIAGNOSIS OF
SYSTEMIC AUTOIMMUNE DISEASES

Examiner: Pablo S. Whaley

Art Unit: 1645

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. In accordance with 37 CFR §1.98(d), copies of the references can be found in Application No. 09/691,405, filed Oct. 20, 2000 (Attorney Docket No. 02558B-063700US). It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

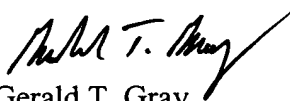
As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

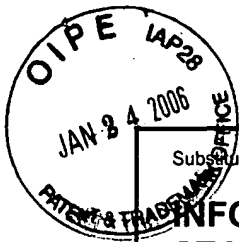
Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,


Gerald T. Gray
Reg. No. 41,797

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
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GTG:mr
60662570 v1



PTO/SB/08B (08-03)

Substitute for form 1449B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet

1

of

1

Complete if Known

Application Number	10/828,846
Filing Date	April 20, 2004
First Named Inventor	Binder, Steven R.
Art Unit	1645
Examiner Name	Pablo S. Whaley
Attorney Docket Number	02558B-063710US

U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	1	US-5,293,454	03-08-1994	Kamiya	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	2	JP	11-504739	A	04-27-1999	Horus Therapeutics, Inc.		<input type="checkbox"/>
	3	WO	97/05553	A1	02-13-1997	Horus Therapeutics, Inc.		<input type="checkbox"/>
	4	JP	06-509865	A	11-02-1994	Terrapin Technologies Inc.		<input type="checkbox"/>
	5	WO	92/17784	A1	10-15-1992	Terrapin Technologies Inc.		<input type="checkbox"/>
	6	JP	2-235170			Kokai		<input type="checkbox"/>
	7	JP	200-172671			Kokai		<input type="checkbox"/>
								<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	8	GRUS et al., "Identification and Classification of an Autoantibody Repertoires (Western Blots) with a Pattern Recognition Algorithm by an Artificial Neural Network," Electrophoresis, Vol. 18, No. 7 (1997) p. 1120-1125	

Examiner
SignatureDate
Considered

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.
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